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CONFIRMATION NO. 1208

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10/017,213		324	3737	S13.12-0111

APPLICANTS

Scott R. Smith, Chaska, MN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

03/20/2002

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No		MN	7	65 55 PSM	2 3 PSM
Verified and Acknowledged	/PARIKHA SOLANKI MEHTA/ Examiner's Signature	Initials				

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TITLE

Recanalization of occluded vessel using magnetic resonance guidance

FILING FEE RECEIVED 1910	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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